FACT SHEET

Basic Information about SARS

SARS
Severe acute respiratory syndrome (SARS) is a viral respiratory illness caused by a coronavirus, called SARS-associated coronavirus (SARS-CoV). SARS was first reported in Asia in February 2003. Over the next few months, the illness spread to more than two dozen countries in North America, South America, Europe, and Asia. The SARS global outbreak of 2003 was contained; however, it is possible that the disease could re-emerge. This fact sheet gives basic information about the illness and what CDC has done to control SARS in the United States. To find out more about SARS, go to www.cdc.gov/ncidod/sars/ and www.who.int/csr/sars/en/.

The SARS outbreak
According to the World Health Organization (WHO), during the SARS outbreak of 2003, a total of 8,422 people worldwide became sick with SARS; of these, 916 died. In the United States, there were 192 cases of SARS among people, all of whom got better. Through July 2003, laboratory evidence of SARS-CoV infection had been detected in only eight U.S. cases. Most of the U.S. SARS cases were among travelers returning from other parts of the world with SARS. There were very few U.S. cases among close contacts of travelers, including health-care workers and family members. SARS did not spread more widely in the community in the United States.

Symptoms of SARS
In general, SARS begins with a high fever (temperature greater than 100.4°F [>38.0°C]). Other symptoms may include headache, an overall feeling of discomfort, and body aches. Some people also have mild respiratory symptoms at the outset. About 10 percent to 20 percent of patients have diarrhea. After 2 to 7 days, SARS patients may develop a dry cough. Most patients develop pneumonia.

How SARS spreads
The main way that SARS seems to spread is by close person-to-person contact. The virus that causes SARS is thought to be transmitted most readily by respiratory droplets (droplet spread) produced when an infected person coughs or sneezes. Droplet spread can happen when droplets from the cough or sneeze of an infected person are propelled a short distance (generally up to 3 feet) through the air and deposited on the mucous membranes of the mouth, nose, or eyes of persons who are nearby. The virus also can spread when a person touches a surface or object contaminated with infectious droplets and then touches his or her mouth, nose, or eye(s). In addition, it is possible that the SARS virus might spread more broadly through the air (airborne spread) or by other ways that are not now known.

What does "close contact" mean?
In the context of SARS, close contact means having cared for or lived someone with SARS or having direct contact with respiratory secretions or body fluids of a patient with SARS. Examples of close contact include kissing or hugging, sharing eating or drinking utensils, talking to someone within 3 feet, and touching someone directly. Close contact does not include activities like walking by a person or sitting across a waiting room or office for a brief time.

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What CDC response to SARS

CDC worked closely with WHO and other partners in a global effort to address the SARS outbreak. For its part, CDC took the following actions:

- Activated its Emergency Operations Center to provide round-the-clock coordination and response.
- Committed more than 800 medical experts and support staff to work on the SARS response.
- Deployed medical officers, epidemiologists, and other specialists to assist with on-site investigations around the world.
- Provided assistance to state and local health departments in investigating possible cases of SARS in the United States.
- Conducted extensive laboratory testing of clinical specimens from SARS patients to identify the cause of the disease.
- Initiated a system for distributing health alert notices to travelers who may have been exposed to cases of SARS.
- In addition, CDC is continuing to work with federal, state and local health departments and other professional organizations to plan for a rapid recognition and response should SARS re-emerge.

CDC Recommendations

CDC issued recommendations and guidelines for people who might have been affected by the outbreak. These included:

For individuals considering travel to areas with SARS:
CDC issued two types of notices to travelers: advisories and alerts. A ***travel advisory*** recommends that nonessential travel be deferred; a ***travel alert*** does not advise against travel, but informs travelers of a health concern and provides advice about specific precautions. CDC updated information on its website on the travel status of other areas with SARS (www.cdc.gov/ncidod/sars/travel.htm) as the situation evolved.

For individuals who had to travel to an area with SARS:
CDC advised that travelers in an area with SARS should wash their hands frequently to protect against SARS infection. In addition, CDC advised that travelers might wish to avoid close contact with large numbers of people as much as possible to minimize the possibility of infection. CDC did not recommend the routine use of masks or other personal protective equipment while in public areas. For more information, read CDC's interim guidelines for persons traveling to areas with SARS (www.cdc.gov/ncidod/sars/travel_advice.htm).

For individuals who thought they might have SARS:
People with symptoms of SARS were advised to consult a health-care provider. They also were told to tell their health-care provider about any recent travel to places where SARS had been reported or whether there was contact with someone who had these symptoms in order to help the health-care provider make a diagnosis.

For family members caring for someone with SARS:
CDC developed interim infection control recommendations for patients with suspected SARS in the household (www.cdc.gov/ncidod/sars/ic-closecontacts.htm). It was advised that these basic precautions be followed for 10 days after respiratory symptoms and fever were gone. During that time, SARS patients were asked to limit interactions outside the home (not go to work, school, or other public areas).

For health-care workers:
CDC issued infection control recommendations for health-care settings (www.cdc.gov/ncidod/sars/infectioncontrol.htm) as well as for the management of exposures to SARS in health-care and other institutional settings (www.cdc.gov/ncidod/sars/exposureguidance.htm).

For more information, visit www.cdc.gov/ncidod/sars or call the CDC public response hotline at (888) 246-2675 (English), (888) 246-2857 (Español), or (866) 874-2646 (TTY)

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